Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERV

Account Number: 075350000353

Phone Fax Number : (212)431-5000 : (212)431-1441

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. ** Email Address:

FLORIDA LIMITED LIABILITY CO.

JMR Records LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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MAR 25. 2010

EXAMINER

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Fax:888-692-9256

JMR Records LLC		:
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Lia	bility Compan
Principal Office Address:	Mailing Address:	•
do Maxim Group, LLC Attn. Mr. Tim Murphy	c/o Maxim Group, LLC Attn. Mr. 1	lim Murphy
105 Lexington Avenue 2nd Floor	405 Lexington Avenue 2nd Floor	
New York, NY 10174	New York, NY 10174	
RTICLE III - Registered Agent, Register has been and the Florida street address of the		SES Y
Jordan R:	abinowitz	AM & C
	Name	
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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature Jordan Ralpinowitz

(CONTINUED)

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9:02

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title;</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Jordan Rabinowitz
	111 Playa Rienta
·	Paim Beach Gardens, FL 33418
·	
	SECREITAR TALLAHASS
	ARE ARE
(Use attachment if necessary)	AM : CF STA
NOTE: An additional article mus	of STATE P 39 at be added if an effective date is requested.
REQUIRED SIGNATURE:	/ A
(In secondance with se	er or an numberized representative of a member. ction 608.08(3), Florida Statutes, the execution index an affirmation under the ponalties of perjury herein area true.)
·	Jordan Rabinowitz
	yped or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)